Headquarters U.S. Air Force

Integrity - Service - Excellence

Healthcare Common Procedure Coding System (HCPCS) – When to Use

Apr 03 Regional Coding VTC

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Objective

- Identify categories of procedure and supply codes based on Healthcare Common Procedure Coding System (HCPCS) 2003
- Identify codes with use restrictions in the Military Health System (MHS)
- Identify modifiers and quantity issues
- Identify common HCPCS codes in the outpatient setting
- Identify commonly used incorrect codes
- Identify new 2003 HCPCS codes

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Why do we use HCPCS codes?

- Collect professional services and procedures (that are not in CPT), and supplies
- Decision making
  - adjunct to CPT procedure codes
  - staffing (indicate workload)
  - funding (e.g., supply budget)
  - occasionally relative value units – balanced score card
- Potentially billable, even those without RVUs

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Nomenclature

- HCPCS Level I – CPT – intended to simplify reporting of procedures or services rendered by physicians or health care providers under their supervision
- HCPCS Level II – HCPCS – “National” codes – to standardize collection of medical services and supplies
- HCPCS Level III – Local Codes – going away 31 Dec 03, not used in the MHS

ADM Patient Encounter

ANT,ADAM 20/806-51-0101 AGE:51y

Appt Date/Time : 28 Jun 2002@1600 Type: ROUT Status: KEPT

Clinic: GENERAL SURGERY SAME DAY SURGERY MEPRS : BBA5

In/Outpatient: Outpatient APV: Yes Work Related: No

Appt Provider: BUNNY,EASTER Injury Date :

2nd Provider #1: CLAUS,SANTA Role: ASSISTING

2nd Provider #2: Role:

Disposition: RELEASED W/ WORK DUTY LIMITATIONS

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ICD-9 Dx Description Priority

+ 401.0 MALIGNANT HYPERTENSION 3

305.1 TOBACCO USE DISORDER U

250.60 DIABETES W NEULOL MANIF UNSPEC 4

278.01 MORBID OBESITY 2

Chief Complaint: 540.9 ACUTE APPENDICITIS NOS

ADM Patient Encounter - E&M Code Enter/Edit

ANT,ADAM 20/806-51-0101 AGE:51y

Appt Date/Time : 28 Jun 2002@1600 Type: ROUT Status: KEPT

Clinic: GENERAL SURGERY SAME DAY SURGERY MEPRS : BBA5

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ICD-9 Dx Description Priority

540.9 ACUTE APPENDICITIS NOS 1

278.01 MORBID OBESITY 2

401.0 MALIGNANT HYPERTENSION 3

250.60 DIABETES W NEULOL MANIF UNSPEC 4

========== Dx Lvl ==========

E&M Code Description (Maximum of 3 codes) 1-4 Mod1 Mod2 Mod3 Units

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99499 UNLISTED EVALUATION AND MANAGEMENT SERVICE 1 1

Edit Icd-9 e&M Cpt/hcpcs Admin Code File View mail cUo eXit

ADM Patient Encounter - CPT/HCPCS Code Enter/Edit

ANT,ADAM 20/806-51-0101 AGE:51y

Appt Date/Time : 28 Jun 2002@1600 Type: ROUT Status: KEPT

Clinic: GENERAL SURGERY SAME DAY SURGERY MEPRS : BBA5

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ICD-9	Dx Description	Priority
540.9	ACUTE APPENDICITIS NOS	1
278.01	MORBID OBESITY	2
401.0	MALIGNANT HYPERTENSION	3
250.60	DIABETES W NEULOL MANIF UNSPEC	4

========== Dx Lvl ==========

CPT/HCPCS	Description	1-4	Mod1	Mod2	Mod3	Units
44970	LAPAROSCOPY, APPENDECTOMY	1				1
00700	ANESTH, ABDOMINAL WALL SURG	1	AA			1
J2250	INJ MIDAZOLAM HYDROCHLORIDE	1				20

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How to use HCPCS 2003

- Index – pathetic
- Coverage codes
- Age and sex edits, symbols ●▲
- Unlisted procedures
- Appendix 1 – Modifiers
- Appendix 2 – Abbreviations and Acronyms
- Appendix 3 – Table of Drugs
- Appendix 4 – Medicare Coverage Issues Manual (CIM) and Medicare Carriers Manual (MCM) References
- Appendix 5 – Insurance companies

Index

- Pathetic. For example:
  - S0610 – Annual gynecological exam, new patient
  - Annual – nothing in index
  - “Gyne” only entry related to gynecology is “Gynecare VERSAPOINT Resectoscopic System Bipolar Electrode”
  - Exam – only listed “Breast and Pelvic G0101” and “oral D0120-D0160”
  - Evaluation – only listed “H2000” for alcohol and drug, dental and team for handicpped
- BUT – Appendix 3 for drugs is pretty good
- Best bet – find the appropriate section heading and start reading…

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Coverage Codes

- In some books, there are blue (blue-gray), pink (dusty rose) and yellow (mustard) backgrounds to the codes.
- Blue – Special Coverage Instructions, e.g., Q0091, Screening Papanicolaou smear; obtaining, preparing and conveyance of cervical or vaginal smear to laboratory CIM 50-20
  - directs you to appendix 4, 50-20
  - NOTE: even if the little triangle indicating a revised code is not next to this, the CIM has changed since last year and you may want to go back and see the changes
- Pink – Not covered by Medicare, e.g., M0076 Prolotherapy, CIM 35-13
- Yellow – Carrier Discretion, e.g., V2100, Single vision, glass or plastic, sphere, single vision, plano to + or – 4.00 per lens

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Age and Sex Edits

- P – Pediatrics: 0-10 years
- A – Adult: 11-99 years (don't ask me about folks that are 100+)
- M – Maternity: 12-50 years
- ♀ female (Venus' hand mirror)
- ♂ male (Mars with his spear)
- Noncovered by Medicare S9436 Childbirth preparation/lamaze classes, non-physician provider, per session M ♀

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Other Symbols

- Black circle – new code
- Black triangle – revised terminology or rules
- Strike-out – deleted from 2003
- Check mark surrounded by a box – HCPCS quantities may not match standard issue quantities so be careful

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Unlisted Procedures

- Not like CPT. May include
  - Unlisted
  - Not otherwise classified (NOC)
    - B9998 NOC for enteral supplies
  - Unspecified
  - Unclassified
  - Other and Miscellaneous
    - A4335 Incontinence supply; miscellaneous
- In civilian sector, would need to submit a written report with these codes, in MHS will not bill at this time
- If you use at your MTF, suggest you standardize on them meaning something in particular, not just a dumping ground

Appendixes

- Appendix 1 – Modifiers – many of the modifiers available as of 1 Apr 03 are listed here
- Appendix 2 – Abbreviations and Acronyms
  - Very limited, missing some, for instance, modifier “G1 – Most recent URR reading of less than 60”
  - URR (Urea Reduction Ratio?) is not listed
- Appendix 3 – Table of Drugs – brand names (with generic names in parentheses) in alphabetical order, units, route of administration, and code (C, J, Q and S)
- Appendix 4 – References, first the CIM (Coverage Issues Manual), then MCM (Medicare Carriers Manual)
- Appendix 5 – Companies Accepting HCPCS Level II Codes – names, addresses and telephone numbers (most have a toll free number)

How to use the book – categories

- A0000-A0999 Transportation Services Including Ambulance (see the T2001-T2007 for other transport codes)
- A4000-A8999 Medical and Surgical Supplies (see notes page, what a conglomeration)
- A9000-A9999 Administrative, Miscellaneous and Investigational
- B4000-B9999 Enteral and Parenteral Therapy
- C codes – Transitional pass-through payment items for the Outpatient Prospective Payment System

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How to use the book – categories

- D codes – American Dental Association codes
- E codes – Durable Medical Equipment (DME)
- G codes – Temporary Procedures/Professional services (would be in CPT but aren't)
- H codes – Alcohol and Drug Abuse Treatment (recommend not using until further defined)
- J codes – Drugs Administered Other Than Oral Method (Appendix 3 will help you find drugs dispensed in the clinic – not for drugs from the pharmacy)

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How to use the book – categories

- K codes – Temporary Durable Medical Equipment (more ostomy stuff here)
- L codes –
  - Orthotic procedures L0000-L4999
  - Prosthetic procedures L5000-L9999
- M codes – Medical services (not covered by Medicare) (e.g., cellular therapy, prolotherapy, IV chelation, fabric wrapping of abdominal aneurysm)

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How to use the book – categories

- P codes – Pathology and Laboratory (look here for transfusion related items such as whole blood, RBCs, frozen plasma, platelets)
- Q codes – Temporary procedures, services and supplies (Q0091 is popular, Q3014 telehealth originating site facility fee, lots of cast supplies, epoetin alpha injections)
- R codes – Radiology
- S codes – Temporary (just about anything you can imagine)

How to use the book – categories

- T codes – For state Medicaid agencies
- V codes
  - Vision V0000-V2999
  - Hearing V5000-V5999
  - Speech-Language Pathology V5300-V5399

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Restrictions

- Many modifiers added 1 Apr 03, still some not able to use
- Recommend against use of the H codes and H modifiers until additional information about the codes is available
- New codes – be conservative in their use if they are not well defined. For instance, currently working on
  - S0315 Disease management program; initial assessment and initiation of the program
  - S0316 Disease management program; follow-up assessment
  - S0320 Telephone calls by a registered nurse to a disease management program member for monitoring purposes; per month
  - T1016 Case management, each 15 minutes
  - T1017 Targeted case management, each 15 minutes

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If both in CPT and HCPCS

- In “Professional Services and Outpatient Coding Guidelines, October 1, 2002” it states “Should a coding situation occur in which both HCPCS Level I and Level II codes exist, Level II codes are given precedence.”
- In the introduction to HCPCS 2003, it states “When both a CPT and HCPCS Level II code have virtually identical narratives for a procedure or service, the CPT code should be used. If , however, the narratives are not identical (for example, the CPT code narrative is generic, whereas the HCPCS Level II code is specific), the Level II code should be used.”
- BOTTOM LINE: Avoid use of temporary codes if CPT has RVUs

Procedures - Medical Necessity

- A service that is reasonable and necessary for the diagnosis or treatment of illness or injury, or to improve the functioning of a malformed body member
  - consistent w/symptoms or dx of the illness or injury under treatment
  - consistent w/generally accepted professional medical standards
  - not furnished primarily for the convenience of the patient, the attending physician, or another physician or supplier; and
  - furnished at the most appropriate level, which can be provided safely and effectively to the pt

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Modifiers – Appendix 1

- Expanded with 1 Apr 03 release
- Common modifiers
  - AA – anesthesia by anesthesiologist
  - AH – clinical psychologist
  - AJ – clinical social worker
  - GO – Service delivered under an outpatient OT plan of care
  - GP – Services delivered under an outpatient PT plan of care

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Modifiers – Appendix 1

- GQ – Via asynchronous telecommunications system (this would be taped telemedicine encounters)
- GT – Via interactive audio and video telecommunication systems (for interactive telemedicine encounters)
- H modifiers – for use in mental health
- SA – NP in collaboration with physician
- SB – Nurse midwife

Modifiers – Appendix 1

- TD – Registered nurse
- TE – LPN/LVN

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Quantity

- Kind of confusing
  - Appendix 3: Table of Drugs
    - Botox Unit is “per unit”
  - H Codes – Alcohol and Drug Abuse Treatment Services
    - H0006 – Alcohol and/or drug services; case management (is this 1 encounter, a month, entire life?)

Common Quantity Codes

- Unit of time procedures, e.g.,
  - T1014 Telehealth transmission, per minute, professional services bill separately
  - T1016 Case management, each 15 minutes
  - J1670 Injection, tetanus immune globulin, human, up to 250 units

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Common HCPCS in outpatient setting

CPT CODE	PROCEDURE DESCRIPTION	RVU WEIGHT	LOC	
A4212	NON CORING NEEDLE OR STYLET	0.00	583	not priced
A4460	ELASTIC COMPRESSION BANDAGE	0.00	1796	not priced
A4565	SLINGS	0.00	1200	not priced
A4570	SPLINT	0.00	3291	not priced
A4580	CAST SUPPLIES (PLASTER)	0.00	584	not priced
A4614	PEAK EXPIR FLOW RATE MET, HAND	0.00	2489	not priced
A4615	CANNULA NASAL	0.00	1731	not priced
A4663	ESRD BLOOD PRESSURE CUFF	0.00	1662	not priced
A9300	EXERCISE EQUIPMENT	0.00	5643	not priced
D1310	NUTRI COUNSEL-CONTROL CARIES	0.00	591	dental not
D1320	TOBACCO COUNSELING	0.00	1032	dental not
D4920	UNSCHEDULED DRESSING CHANGE	0.00	863	dental not

Common HCPCS in outpatient setting

G0001	DRAWING BLOOD FOR SPECIMEN	0.00	3180	$3.00 (separate fro
G0008	ADMIN INFLUENZA VIRUS VAC	0.00	873	not priced
G0101	CER/VAG CA SCR;PELV&BREAST EXM	0.64	30823	don't use $40
G0102	PROSTATE CANCER SCRN;DIGT RECT	0.24	3143	$23
G0104	COLOREC CA SCR;FLX SIGMOIDSCPY	1.54	981	$116 use CPT
G0107	COLOREC CA;FEC-OCCULT,1-3 SIML	0.00	999	$5.21 use CPT
H0005	ALCOHOL &/ DRUG SERV;GRP COUNS	0.00	954	not priced
J0690	INJECT,CEFAZOLIN SODIUM,500 MG	0.00	636	$1.74
J0696	CEFTRIAXONE SODIUM INJ/250 MG	0.00	3643	$15
J1000	DEPO-ESTRADIOL CYPIONATE INJ	0.00	762	$.81 up to 5 mg
J1050	MEDROXYPROGESTERONE INJ	0.00	1124	$9.96
J1055	MEDRXYPROGESTER ACETATE INJ	0.00	4619	not priced
J1100	INJCTN,DEXAMETHASONE SDM PHOS	0.00	1864	$.10/mg
J1200	DIPHENHYDRAMNE HCL INJ <=50 MG	0.00	1825	$1.61 up to 50 mg
J1642	INJ HEPARIN SODIUM PER 10 U	0.00	2085	$.06/10 units
J1670	TETANUS IMMUNE GLOBULIN INJ	0.00	859	$114 up to 250 unit

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Common HCPCS in outpatient setting

J1885	KETOROLAC TROMETHAMINE INJ	0.00	11319	$5.75/15 mg
J1940	FUROSEMIDE INJECTION	0.00	494	$1.01 up to 20 units
J1956	INJECTION, LEVOFLOXACIN,250 MG	0.00	842	$19.66 /250 mg
J2000	LIDOCAINE INJECTION	0.00	3908	surgical package?$
J2175	MEPERIDINE HYDROCHL / 100 MG	0.00	2434	$.56/100mg
J2250	INJ MIDAZOLAM HYDROCHLORIDE	0.00	3525	$1.41/1mg
J2270	MORPHINE SULFATE INJECTION	0.00	2142	$0.72/10mg
J2405	ONDANSETRON HCL INJECTION	0.00	491	$6.09/1mg
J2430	PAMIDRONATE DISODIUM / 30 MG	0.00	489	$275/30 mg
J2550	PROMETHAZINE HCL INJECTION	0.00	6281	$2.24/50 mg
J2765	METOCLOPRAMIDE HCL INJECTION	0.00	1972	$1.90/10 mg
J2780	INJ,RANITIDINE HYDROCHLOR,25MG	0.00	576	
J2910	AUROTHIOGLUCOSE <= 50 MG INJ	0.00	532	
J2930	METHYLPREDNISOLONE INJECTION	0.00	1466	
J3010	INJCTN,FENTANYL CITRATE,0.1 MG	0.00	3907	
J3130	TESTOSTERONE ENANTHATE INJ	0.00	739	$16.25/200 mg

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Common HCPCS in outpatient setting

J3301	TRIAMCINOLONE ACETONIDE INJ	0.00	1862	
J3360	DIAZEPAM INJECTION <= 5 MG	0.00	584	$3.77/5mg
J3420	VITAMIN B12 INJECTION	0.00	4147	$1.26/1,000 mcg
J3490	DRUGS UNCLASSIFIED INJECTION	0.00	1112	not priced
J7030	NORMAL SALINE SOLUTION INFUS	0.00	6411	$10.77/1000 cc
J7040	NORMAL SALINE SOLUTION INFUS	0.00	2947	$5.39/500 ml
J7050	NORMAL SALINE SOLUTION INFUS	0.00	6689	$2.70/250 cc
J7618	ALBUT,SOL AD THR DME,CON FRM	0.00	3934	not priced
J7619	ALBUT,SOL AD THR DME,UN DS FRM	0.00	2689	not priced
J7644	IPRATROPIUM BROMIDE,INH,UNT/MG	0.00	1284	not priced
J8499	ORAL PRESCRIP DRUG NON CHEMO	0.00	1954	not priced
J9190	FLUOROURACIL INJECTION	0.00	491	$2.82/500 mg
P3001	SCREENING PAP SMEAR BY PHYS	0.62	777	incorrect for outp
P7001	CULTURE BACTERIAL URINE	0.00	512	incorrect for outp

Common HCPCS in outpatient setting

Q0091	OBTAINING SCREEN PAP SMEAR	0.53	106006	$43.79
Q0111	WET MOUNTS/ W PREPARATIONS	0.00	5218	$6.85
Q0112	POTASSIUM HYDROXIDE PREPS	0.00	2324	
Q0136	NON ESRD EPOETIN ALPHA INJ	0.00	738	$12.69/1,000 units
Q0166	GRANISETRON HYDROCHLORIDE,1 MG	0.00	838	not priced
R0076	TRANSPORT PORTABLE EKG	0.00	1105	incorrect for outpt
S0020	INJ,BUPIVICAINE HYDROCHLR,30ML	0.00	500	not priced
S0605	DIGITAL RECTAL EXAM, ANNUAL	0.00	4404	not priced
S0610	ANN GYNECOLOGICAL EXAM,NEW PAT	0.00	953	not priced
S0612	ANN GYNECOLOGICAL EXAM,EST PAT	0.00	5290	not priced
S0620	ROUT OPHTHALMOLOG EXAM,REF;NEW	0.00	680	not priced
S0630	REM SUTURES;PHYS NOT ORIG PHYS	0.00	1805	not priced
S0810	PHOTOREFRACT KERATECTOMY (PRK)	0.00	1589	not priced
S0820	COMPUT CORNEAL TOPOGRAPHY,UNIL	0.00	2593	not priced
S5000	PRESCRIPTION DRUG, GENERIC	0.00	2646	not priced
S5001	PRESCRIPTION DRUG, BRAND NAME	0.00	819	not priced

Common HCPCS in outpatient setting

S8105	OXIMETR,MEAS BLOOD O2,NONINVAS	0.00	773	not priced
S9141	DIABET MGT PG,FOL-UP,MD PROVID	0.00	500	not priced
S9470	NUTRITN COUNSEL, DIETITIAN VIS	0.00	2408	not priced
V2799	MISCELLANEOUS VISION SERVICE	0.00	774	not priced
V5008	HEARING SCREENING	0.00	1070	not priced

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New HCPCS for 2003

- G0245 Initial E&M of DM with diabetic sensory neuropathy resulting in a loss of protective sensation (lops)…
- G0246 F/U…
- G0247 Routine foot care…
- Do not be tempted to use until you receive further info
  - H0031 – Mental health assessment, by non-physician
  - H0032 – Mental health service plan development by non-physician

New HCPCS for 2003

- S0315 Disease mngt program; initial assessment and initiation of the program
- S0316 Disease mngt program; f/u assessment
- S0320 Telephone calls by a registered nurse to a disease mngt program member for monitoring purposes; per month
- S0390 Routine foot care; removaland/or trimming of corns, calluses and /or nails and preventive maintenance in specific medical conditions (e.g., DM), per visit
- S5190 Wellness assessment, performed by non-physician

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New HCPCS for 2003

- S9436 Childbirth prep/lamaze classes, non physician provider,per session
- S9437 Childbirth refresher classes, non-physician provider, per session
- S9438 Cesarean birth classes, non-physician provider, per session
- S9439 VBAC classes, non-physician provider, per session
- S9444 Parenting classes, non-physician provider, per session
- S9447 Infant safety (including CPR) classes, non-physician provider, per session

New HCPCS for 2003

- S9449 Weight mngt classes, non-physician provider, per session
- S9451 Exercise classes, non-physician provider, per session
- S9452 Nutrition classes, non-physician provider, per session
- S9453 Smoking cessation classes, non-physician provider, per session
- S9454 Stress mngt classes, non-physician provider, per session

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New HCPCS for 2003

- Case Management (Assess, plan, implement, coordinate, monitor, and evaluate options and services to meet a patient's health needs through communication and available resources to promote quality, cost-effective outcomes)
- T1016 Case management, each 15 min
- T1017 Targeted case management, each 15 min

RVUs and CMAC

- Most HCPCS codes do NOT have an associated RVU

- Always good to check out
  - http://www.tricare.osd.mil/cmac/
  - Scroll to bottom of page, hit “I accept”
  - Click on “CMAC Procedure Pricing”
  - Scroll to bottom of page, enter your zip code (for oversees, enter “Oregon”, then on next page, click on “Portland” – it is the average)
  - Enter the HCPCS code
- “Please enter a valid procedure code. Valid codes are 5 digits. Most are numeric, but some may begin with “A, E, G, J, L, M, W, P, or Q”

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Future Talks

- May – Probably Industry Based Workload Alignment (IBWA) – delay ICD-9-CM to later month
- June – Business of Coding (CPT and HCPCS)
- July – Using Clinical Data (ICD-9-CM)
- August – Aggregate Audits
- September – Super Bills
- October – Inpatient Professional Services/OB coding

- Talks subject to change

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Questions?

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